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PTO/SB/01 (12-97)  
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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)	<b>Attorney Docket Number</b>	12/211
	<b>First Named Inventor</b>	Konopitzky, Renate
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	09 / 631,863
	<b>Filing Date</b>	August 3, 2000
	<b>Group Art Unit</b>	
<input type="checkbox"/> Declaration Submitted with Initial Filing	<b>OR</b>	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
<b>Examiner Name</b>		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Tumor-associated antigen (R11)

the specification of which (Title of the Invention)

☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) August 3, 2000 as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
DE 199 36 563.6	Germany	August 4, 1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/154,161	September 15, 1999	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 000023703

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Robert P. Raymond	25,089	Susan K. Pocchiari	45,016
Alan R. Stempel	28,991	Philip I. Datlow	40,232
Marv-Ellen M. Devlin	27,928	Timothy X. Witkowski	40,232
Anthony P. Bottino	41,629		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 000023703 OR ☐ Correspondence address below

Name	Robert P. Raymond				
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Address	900 Ridgebury Road, P. O. Box 368				
City	Ridgefield	State	CT	ZIP	06877-0368
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname					
Renate		Konopitzky					
Inventor's Signature	<i>Renate Konopitzky</i>		Date	2.12.00			
Residence: City	Bad Voeslau	State		Country	Austria	Citizenship	AT
Post Office Address	Waldwiese 6/11						
Post Office Address							
City	Bad Voeslau	State		ZIP	A-2540	Country	AT

☒ Additional inventors are being named on the ☒ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>1</u> of <u>1</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Ulrich				Koenig			
Inventor's Signature	<i>Ulrich Koenig</i>					Date	16.11.00
Residence: City	Vienna	State		Country	Austria	Citizenship	AT
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City	Vienna	State		ZIP	A-1180	Country	Austria
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Wolfgang				Sommergruber			
Inventor's Signature	<i>Wolfgang Sommergruber</i>					Date	12.11.00
Residence: City	Purkersdorf	State		Country	Austria	Citizenship	AT
Post Office Address	Linzerstrasse 19/Haus 4						
Post Office Address							
City	Purkersdorf	State		ZIP	A-3002	Country	Austria
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Thomas				Woelfel			
Inventor's Signature	<i>Thomas Woelfel</i>					Date	02.01.01
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Post Office Address							
City	Mainz	State		ZIP	D-55129	Country	Germany

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Case No. 12/211